

REDUCING THE SUICIDE RATE IN THE UNITED STATES AIR FORCE
WITH AN “EXTREME RISK” MILITARY PROTECTION ORDER LAW

by
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Abstract

Over the past 20 years, the Air Force has fought suicide in its ranks through leadership, coordination, communication, camaraderie, education, training, mental health treatment, community engagement, and suicide data analysis and reporting. However, despite its best efforts, the suicide rate in the Air Force continues to climb. In 2019, 137 Air Force personnel committed suicide, representing a 33% increase over 2018 and a surge to the highest total in three decades. This policy proposal augments existing Air Force suicide prevention programs by directly addressing the most common and most lethal means of suicide in the military—firearms. The recommendations include: 1) requiring airmen to register privately-owned firearms with their unit commanders to give them an awareness of which airmen have access to firearms, 2) enabling unit commanders, colleagues, family members, and friends to petition for an “Extreme Risk” Military Protection Order (MPO) to temporarily take away an airman’s firearms if he or she is a risk to themselves or others, and 3) developing policies, procedures, training, and communications to implement the first two proposals without negatively affecting the career prospects of the petitioners or respondents of Extreme Risk MPOs.

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Key Words: Suicide, Depression, Firearm, Extreme Risk, Protection Order, Department of Defense, DoD, Military, Air Force

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TO: General David L. Goldfein, Chief of Staff of the United States Air Force

FROM: Jeffrey Rial Johnson

SUBJECT: Reducing the Suicide Rate in the United States Air Force

DATE: 1 May 2020

Action Forcing Event

The U.S. Air Force reported on January 31st, 2020, that 137 Air Force personnel committed suicide in 2019, representing a 33% increase over 2018 and a surge to the highest total in three decades after five years of relative stability.¹

Problem Statement

In 2019, the Air Force saw a sharp increase in the total number and incidence of suicide within its ranks. The total number of suicide deaths among all Air Force personnel—including active-duty Air Force, Air Force Reserve, Air National Guard, and Air Force civilian personnel—rose from 103 in 2018 to 137 in 2019. The number of suicide deaths among active-duty airmen rose from 60 in 2018 to 84 in 2019 and the incidence of suicide among active-duty airmen rose from 18.7 deaths per 100,000 airmen in 2018 to 25.3 deaths per 100,000 airmen in 2019.^{2,3}

The rise in suicide deaths among Air Force personnel is most significant in the active-duty and reserve components, with only a slight increase in the Air Force civilian component and a slight decrease in the Air National Guard component. The Air Force

¹ J. Edward Moreno, “Air Force Suicides Rise to Highest Level in Three Decades,” The Hill, February 8, 2020, <https://thehill.com/policy/defense/air-force/482154-air-force-suicides-rise-to-highest-level-in-three-decades>.

² Ibid.

³ U.S. Department of Defense, Under Secretary of Defense for Personnel and Readiness, *DoD Annual Suicide Report for Calendar Year 2018*, (Arlington, 2019).

identified the aircraft maintenance and security forces career fields as those with the highest suicide rate, likely because those career fields are two of the largest and are demographically younger and more likely to be male.⁴ The Air Force also noted that more than one-third of suicide victims experienced a failing relationship in the three months before their death and that almost half had communicated their intent to die to a romantic partner.⁵

The use of a firearm is by far the most popular means to commit suicide. While there are countless ways to commit suicide, research shows that 50% of suicide deaths in the U.S. involve firearms. In the military, where all service members are trained to use firearms and many either own or have ready access to firearms, 70% of suicides involve firearms.⁶ Personal or household gun ownership triples the risk of suicide and studies also correlate higher suicide rates with lax firearm storage practices.⁷ One study found that nearly 36% of military service members reported having a firearm in or around their homes, but less than a third of those with firearms safely and securely stored their weapons. Furthermore, nearly half indicated their firearms were not safely stored.

Suicides exact an intense emotional cost on the families, friends, and colleagues of suicide victims. Military suicides not only affect the families and friends of the victims but also affect the morale of the victim's unit and, by extension, the morale, readiness,

⁴ James LaPorta, "Military Suicides Hit a Record High in 2018, Pentagon Report Says, Despite Prevention Efforts," *Newsweek*, September 26, 2019, <https://www.newsweek.com/military-suicides-hit-record-high-2018-pentagon-report-says-despite-prevention-efforts-1461612>.

⁵ Ibid.

⁶ Amy Novotny, "Stopping military and veteran suicides," *Monitor on Psychology* 51, no. 1 (January 2020), <https://www.apa.org/monitor/2020/01/ce-corner-suicide>.

⁷ "Those Who Serve: Addressing Firearm Suicide Among Military Veterans," Everytown for Gun Safety Support Fund, October 24, 2019, https://everytownresearch.org/those-who-serve-addressing-firearm-suicide-among-military-veterans/#foot_note_11.

and effectiveness of the military.⁸ In addition to emotional costs, suicide has a financial cost. One study estimates that the average cost of a single suicide is \$1,329,553, mostly attributed to the lost productivity of family and friends.⁹

History and Background

Suicide is the 10th leading cause of death in the United States and the 2nd leading cause of death among active-duty military personnel, responsible for 40% more military deaths than combat.^{10,11} More than 78,000 veterans have died from suicide since 2005, compared with 5,326 combined combat deaths from Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) since 2001.^{12,13} The incidence of suicide in the military was relatively stable from World War II through the start of the Iraq War in 2003. The suicide rate rose with the overlapping wars in Iraq and Afghanistan but has been mostly stable since 2013.¹⁴ In 2018, the U.S. Department of Defense (DoD) reported a total of 541 confirmed or pending suicide deaths among active-duty personnel, resulting in a rate of 24.8 suicide deaths per 100,000 active-duty personnel, up from 18.5 in 2013.¹⁵

⁸ Donald S. Shephard, et. al., "Suicide and Suicidal Attempts in the United States: Costs and Policy Implications," *Suicide and Life-Threatening Behavior* 46, no. 3 (June 2016).

⁹ Russell B. Carr, "When a Soldier Commits Suicide in Iraq: Impact on Unit and Caregivers," *Psychiatry* 74, no. 2 (Summer 2011).

¹⁰ Hannah Nichols, "What are the leading causes of death in the US?," *Medical News Today*, July 4, 2019, <https://www.medicalnewstoday.com/articles/282929.php#suicide>.

¹¹ "Recent Trends in Active-Duty Military Deaths," Congressional Research Service, May 20, 2019, <https://fas.org/sgp/crs/natsec/IF10899.pdf>.

¹² U.S. Department of Veterans Affairs, Office of Mental Health and Suicide Prevention, *2019 National Veteran Suicide Prevention Annual Report*, (Washington, D.C., 2019).

¹³ U.S. Department of Defense, *Defense Casualty Analysis System*, (Arlington, 2020), <https://dcas.dmdc.osd.mil/dcas/pages/main.xhtml>.

¹⁴ Jeffrey Allen Smith, Michael Doidge, and Ryan Hanoa, "A Historical Examination of Military Records of US Army Suicide, 1819 to 2017", *JAMA Network Open*, (December 2019).

¹⁵ *DoD Annual Suicide Report for Calendar Year 2018*.

The DoD identified several risk factors associated with military deaths by suicide, including relationship, financial, and legal problems; ineffective coping skills; a reluctance to seek help; and a perceived stigma to engage in treatment.¹⁶ The DoD funded a study of 72 soldiers that had attempted suicide at Fort Carson, Colorado. All 72 indicated a desire to end intense emotional distress as a key reason for their suicide attempt and that soldiers often listed multiple reasons—an average of 10 each—for their suicide attempt. The DoD also determined that suicide rates in the military were 24% higher among troops that were divorced or separated.¹⁷

While the suicide rates in the military are on par with nationwide trends when adjusted for the demographic characteristics of the military population, the U.S. military has made a concerted effort over the past 24 years to combat suicide among its ranks.¹⁸ Suicide first became an Air Force priority in the aftermath of the suicide death of Admiral Jeremy Boorda, then the Chief of Naval Operations in 1996. In 1996, the Air Force Vice Chief of Staff commissioned the Air Force Suicide Prevention Integrated Product Team (IPT) to develop a comprehensive plan to respond to the increasing number of suicides among active-duty Air Force personnel. The IPT determined that many suicides in the Air Force are preventable and that suicide was a problem for the entire Air Force community. It determined that a community approach to preventing suicide headed by the Air Force Chief of Staff and four-star generals would be the most effective means to reach all Air Force members and encourage and protect those who

¹⁶ *DoD Annual Suicide Report for Calendar Year 2018*.

¹⁷ Craig J. Bryan, et. al., “Understanding and Preventing Military Suicide,” *Archives of Suicide Research*, (April 2012).

¹⁸ LaPorta, “Military Suicides Hit a Record High in 2018.”

responsibly seek mental health treatment. The IPT developed a suicide-prevention program that included 11 initiatives^{19,20}:

1. Leadership Involvement – The Air Force Chief of Staff and other senior Air Force leaders and Air Force base commanders actively support the suicide prevention initiatives in the Air Force community by communicating with its members and fully engaging in suicide-prevention.
2. Military Education – All Air Force military and civilian personnel receive annual suicide-prevention training on risk factors for suicide, intervention skills, and referral procedures for those at risk. Suicide prevention is also incorporated into all formal military training to include background knowledge about suicide, warning signs, implications of seeking treatment, personal coping skills, peer support skills, and leadership skills.
3. Guidelines for Commanders – Commanders receive training on how and when to use mental health services and their role in encouraging early help-seeking behavior.
4. Community Preventive Services - The Medical Expense and Performance Reporting System was updated to track and encourage prevention activities, resulting in the time spent on prevention activities increasing to the level of two percent of all mental health activities, the equivalent of 26 Full-Time Equivalent (FTE) personnel across the Air Force.

¹⁹ U.S. Department of Defense, Department of the Air Force, *The Air Force Suicide Prevention Program*, (Arlington, 2001).

²⁰ Kerry L. Knox, et. al., “The US Air Force Suicide Prevention Program: Implications for Public Health Policy,” *American Journal of Public Health* 100, no. 12 (December 2010).

5. Community Education and Training – Annual suicide prevention training is provided for all military and civilian employees in the Air Force, including training targeted at individuals, squadron commanders, community health professionals, and medical professionals.
6. Investigative Interview Policy – The period following an arrest or investigative interview is a high-risk time for suicide. Following any investigative interview, the investigator is required to release the individual directly to their commander, first sergeant, or supervisor, who is then responsible for assessing the individual's emotional state and contacting a mental health provider if any question about the possibility of suicide exists.
7. Traumatic Stress Response (TSR) – The Air Force deployed trauma stress response teams worldwide to respond to traumatic incidents such as terrorist attacks, serious accidents, or suicide and help personnel deal with the emotions they experience in reaction to traumatic incidents.
8. Integrated Delivery System (IDS) and Community Action Information Board (CAIB) – At the Air Force, Major Command (MAJCOM), and base levels, the CAIB and IDS provide a forum for the cross-organizational review and resolution of individual, family, installation, and community issues that impact the readiness of the force and the quality of life for air force members and their families.
9. Limited Privilege Suicide Prevention (LPSP) Program – Patients at risk for suicide are afforded increased confidentiality when seen by mental health

providers. Limited Patient-Psychotherapist Privilege limits the release of patient information to legal authorities during military judicial proceedings.

10. IDS Consultation Assessment Tool – The IDS Consultation Assessment Tool allows commanders to assess unit strengths and identify areas of vulnerability. Commanders can use this tool in collaboration with IDS consultants to design interventions to support the health and welfare of their personnel.

11. Suicide Event Surveillance System (SESS) – Information on all Air Force active duty suicides and suicide attempts are entered into a central database that tracks suicide events and facilitates the analysis of potential risk factors for suicide in air force personnel.

With the rise in the rate of military suicides since the invasion of Iraq in 2003, the DoD has stepped up its efforts to understand and combat suicide in the military, as shown in Figure 1 below.²¹

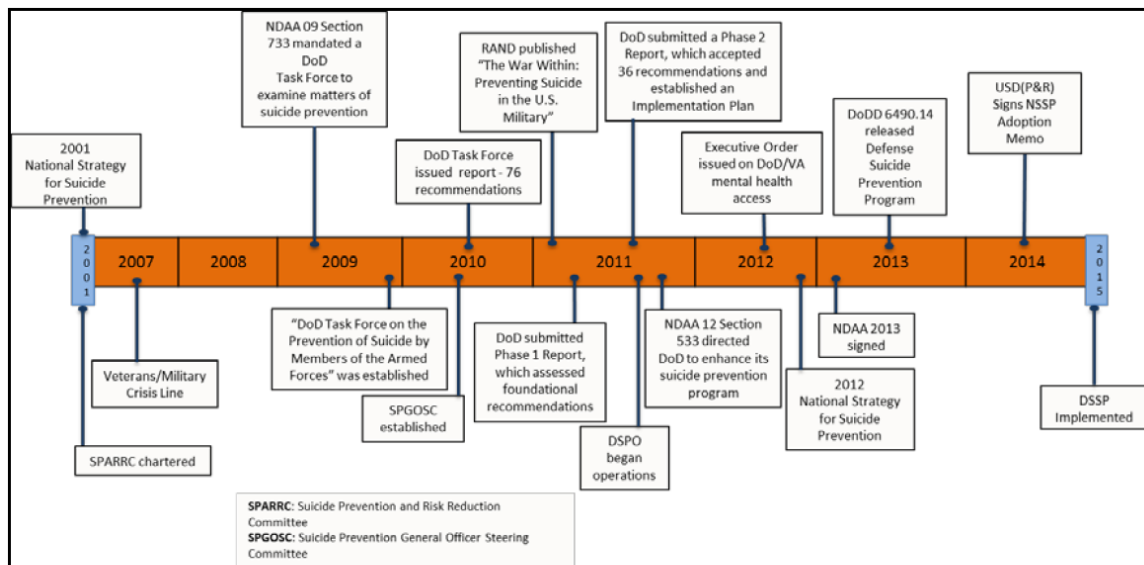


Figure 1: Key Events in DoD Suicide Prevention Since 2001

²¹ Department of Defense, Defense Suicide Prevention Office, *DoD Strategy for Suicide Prevention*, (Arlington, 2015).

In 2001, after the U.S. Office of the Surgeon General released the National Strategy for Suicide Prevention, the DoD established the Suicide Prevention and Risk Reduction Committee (SPARRC) to bring key stakeholders from the DoD and each military service together to address suicide in the military. The SPARRC was chartered to develop standard suicide reporting standards, to collaborate on an annual military suicide-prevention conference, and to develop joint products and share best practices and program resources.²² In 2008, the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) started the Real Warriors Campaign, a public education initiative to address the stigma of seeking psychological care and treatment. The campaign produced public service announcements, social marketing materials on the campaign, a public website with links to resources for active duty, Guard and reserve, veterans, families, and health professionals (DCoE, undated), and campaign ads and posters.²³ The DoD also initiated the DoD Suicide Event Reporting (DoDSER) system in 2008 to track suicide and suicide-related behaviors among all military Service Members.²⁴

Fiscal Year (FY) 2009 National Defense Authorization Act (NDAA) Section 733 created the DoD Task Force on the Prevention of Suicide by Members of the Armed Forces. The task force arrived at 49 findings and 76 associated recommendations focused on organization and leadership; wellness enhancement and training; access to, and delivery of, quality care; and surveillance, investigations, and research.²⁵ The task force

²² Rajeev Ramchand, et. al., *The War Within: Preventing Suicide in the U.S. Military* (Santa Monica: RAND, 2011).

²³ Ibid.

²⁴ U.S. Department of Defense, Task Force on the Prevention of Suicide by Members of the Armed Forces, *The Challenge and the Promise: Strengthening the Force, Preventing Suicide, and Saving Lives* (Arlington: 2010).

²⁵ Ibid.

found that the military services have substantially increased their focus and investments in suicide prevention over the years to meet current requirements. The task force concluded that the urgency to respond to the challenge of suicide may have driven the military services to deploy many of these initiatives without the benefit of strategic planning, evaluation, standardization, or plans for sustainment. They also found unintended consequences of this rush to deploy critical programs, including wide variations in the implementation of many initiatives, many programs that overlapped, unnecessary inefficiencies, and prevention opportunities that were missed because of gaps between programs, and that many programs were misunderstood by Service Members, their families, and commanders in the field.²⁶

To mitigate these issues, the DoD stood up the Defense Suicide Prevention Office (DSPO) in 2011 to provide “advocacy, program oversight, and policy for DoD suicide prevention, intervention, and postvention efforts to reduce suicidal behaviors in service members, civilians, and their families.” The office developed a Defense Strategy for Suicide Prevention, established a 24-hour Military Crisis Line, and initiated annual DoD Suicide Event Reports (DoDSER) and quarterly DoD military suicide reports.²⁷ While these developments are steps in the right direction, the DSPO has suffered from leadership turnover, bureaucratic complexity, reorganizations, understaffing, poorly executed contracts, budget uncertainty, and low morale.²⁸ As a result, the DSPO and its efforts have had minimal effect on the suicide rate in the military, which continued to rise

²⁶ Ibid.

²⁷ Ibid.

²⁸ Dan Spinelli, “The Pentagon Spent Millions to Prevent Suicides. But the Suicide Rate Went Up Instead.” *Mother Jones*, November 13, 2018, <https://www.motherjones.com/politics/2018/11/the-pentagon-spent-millions-to-prevent-suicides-but-the-suicide-rate-went-up-instead/>.

from 18.03 deaths per 100,000 service members in 2011 to 24.8 deaths per 100,000 service members in 2019.

This rise in suicide deaths among Air Force personnel has prompted increased attention from Air Force leadership, who have been pursuing “immediate, mid-term, and long-range suicide prevention initiatives for the Total Force that focus on connections between individuals, units, and Air Force family; protections in environments, services, and policies; detection of risk in individuals and units; and equipping the Total Force and family members to mitigate risk and increase resilience.”²⁹ Since 2015, the Air Force has increased its focus on resilience by increasing the number of “Wingman” days throughout the year, when airmen are given a day off work to focus on team cohesion through sports and recreational activities. The Air Force also established a resilience.af.mil website to make support systems more accessible to Air Force personnel and their families. In 2019, after observing the accelerated rate of suicides in its ranks, the Air Force Chief of Staff ordered a “stand-down” day, giving airmen a day off to rest, reflect, and support each other to improve resilience.

Sadly, despite its best efforts over the past two decades, the Air Force has been unable to reduce the rate of suicide in its ranks, leading Air Force Chief of Staff General David Goldfein to candidly confess “I actually don’t know what’s going on, and I certainly can’t point to our programs today and say that they’re working”.³⁰

²⁹ Moreno, “Air Force Suicides Rise to Highest Level in Three Decades.”

³⁰ Paul D. Shinkman, “Air Force Chief Grapples With Suicide Scourge: ‘I Don’t Have a Solution’,” U.S. News and World Report, August 12, 2019, <https://www.usnews.com/news/national-news/articles/2019-08-12/air-force-chief-grapples-with-suicide-scourge-i-dont-have-a-solution>.

Description of Policy Proposal

Easy access to a firearm in a moment of suicidal thought can have lethal consequences.³¹ Firearms are a particularly lethal means of self-harm, with a fatality rate of approximately 90 percent, compared to 4 percent when using other methods.³² Because firearms are a 90% lethal means of suicide and 70% of military suicides involve firearms, reducing access to firearms by airmen that are experiencing suicidal thoughts can be an effective method for reducing suicide in the Air Force.

While the Air Force already has policies, procedures, and training in place to help airmen identify colleagues in distress, the only tools Air Force leaders currently have for intervening in and preventing suicide are either soft, slow, and indirect (e.g., offering them emotional support, connecting them to mental health services, etc.) or they require meeting a high legal standard for an imminent threat (e.g., involuntary psychiatric hospitalization). Air Force leaders cannot remove a distressed airman's access to the most common and most lethal means of suicide when the airman is off base and the threat of suicide is high but not imminent. Therefore, I recommend the following to enable unit commanders to inquire about and track firearm ownership by their airmen and to allow them to remove firearms from an airman's possession if he experiences a suicidal crisis:

- 1) Propose and support a provision in the next NDAA to modify Public Law Number 111-383 (created by FY 2011 NDAA and amended by FY 2013 NDAA) to permit commanders to collect information about an airman's ownership of privately-owned firearms that are stored off base and further

³¹ Andrew Anglemyer, Tara Horvath, and George Rutherford, "The Accessibility of Firearms and Risk for Suicide and Homicide Victimization Among Household Members: A Systematic Review and Meta-Analysis," *Annals of Internal Medicine* 160, no. 2 (January 2014).

³² Everytown for Gun Safety, "Those Who Serve."

require members of the Armed Forces to register firearms stored off base with their unit commanders. Today unit commanders have broad authority to inquire about and require the registration of firearms stored in on-base housing units. This proposal would extend this authority to include service members living in private housing outside of a military installation, as recommended by the U.S. Army's Report of Investigation (ROI) into the April 2014 mass shooting at Fort Hood in Texas.³³

- 2) Propose and support a provision in the next NDAA to establish an "Extreme Risk Protection Order" law that would allow anyone to request and unit commanders to issue a Military Protective Order (MPO) to temporarily remove firearms from the possession of military personnel deemed to be at "extreme risk" of committing suicide or homicide. Today, unit commanders have the authority to require any individual within their command residing and storing firearms on base to surrender their privately-owned firearms and ammunition for storage in the unit's arms room when, in their opinion, the presence of firearms in the service member's possession threatens good order, discipline, or safety of the unit, the individual, or the family members of the individual.³⁴ However, they do not have the authority to confiscate privately-owned firearms from service members living off base. This proposal would extend the ability to temporarily remove firearms from a service member's possession when they live off base and are determined to be a risk to

³³ U.S. Department of Defense, Department of the Army, *Report of Investigation into the 2 April 2014 Shooting Incident at Fort Hood* (Arlington, 2014).

³⁴ Ramchand, et. al., *The War Within*.

themselves or others, as recommended by multiple gun violence prevention organizations.^{35,36,37}

- 3) Develop policies, procedures, training, and communications for unit commanders, first responders, health professionals, service members, and their families to implement (1) and (2) in a way that avoids attaching a social or professional stigma to either the petitioner and respondent of Extreme Risk MPOs.

With the first proposal, unit commanders would be able to ask service members if they own firearms and how they store them, both upon the assignment of the service member to the installation and annually thereafter. If the service member reports that he or she owns a firearm, the unit commander would require the service member to register their firearm with the base security office and certify that the firearm will be stored securely. The base security office would maintain the registry and make it available to the unit commander, security personnel, and health professionals when there is reason to believe a service member is in crisis. This registry would be part of an integrated DoD-wide system so that firearm ownership information can be correlated across installations as service members transfer among bases. The requirement to inform the unit commander about firearm ownership and to register firearms would be enforced by requiring proof of registration whenever the service member purchases ammunition at a base exchange, uses the firearm at a base firing range, or transports the firearm on or off base. Service

³⁵ “Extreme Risk Laws Save Lives,” Everytown for Gun Safety Support Fund, April 17, 2020, <https://everytownresearch.org/extreme-risk-laws-save-lives/>.

³⁶ “What Are Extreme Risk Laws?” Brady Campaign to Prevent Gun Violence, 2019, <https://www.bradyunited.org/fact-sheets/what-are-extreme-risk-laws>.

³⁷ “Extreme Risk Protection Orders,” Giffords Law Center to Prevent Gun Violence, 2018, <https://lawcenter.giffords.org/gun-laws/policy-areas/who-can-have-a-gun/extreme-risk-protection-orders/>.

members would also be arrested and prosecuted if they are discovered to own an unregistered firearm during the execution of a search warrant.

The second proposal would work similarly to the existing Extreme Risk Protection Order (ERPO) laws in several U.S. states and the MPOs used in the DoD today to curb domestic violence. If a supervisor, health professional, family member, or friend believes a service member is a danger to himself or others, that person would be able to petition the service member's unit commander to issue an order of protection compelling the service member to surrender their firearms to the unit arms room until the risk is mitigated. While state-level laws require a court petition, federal law may empower unit commanders to issue MPOs, as it does today to protect victims of domestic violence, and the Uniform Code of Military Justice (UCMJ) makes it a military criminal offense to violate those orders.^{38,39} The unit commander would be required to consider any petition for an Extreme Risk MPO within 24 hours and would be able to issue an MPO immediately to prevent the harm that might result if the person continues to have access to firearms. These orders of protection could be issued *ex parte* and by remote means (e.g., telephone, e-mail) to allow law enforcement personnel to quickly execute the orders and intervene in urgent crises and reduce the risk of the respondent trying to conceal firearms in their possession before the execution of the order. Once the order is issued, the unit commander or subordinate officer would accompany a health professional and a military police officer to the service member's residence to take possession of the firearm, initiate a command-directed mental health investigation to determine if the

³⁸ *Duncan Hunter National Defense Authorization Act for Fiscal Year 2009*, 10 U.S.C § 1567 (2009).

³⁹ *Article 90: Assaulting or Willfully Disobeying a Superior Commissioned Officer*, U.S. Uniform Code of Military Justice.

person meets the standard for involuntary commitment to a psychiatric facility, and/or connect the individual to mental health resources. The unit commander could then require a certain cooling-off period and a psychological evaluation before returning the firearms to the service member.

After the order is executed, if the respondent believes the order was issued unnecessarily or in error, he or she would then be able to challenge the order and take possession of the firearms if a health professional determines that they are not a danger to themselves or others. If the order was issued *ex parte*, it would only be valid until a hearing is held where the respondent can take part to either confirm or revoke the order. At the hearing, the unit commander or other presiding official would be able to issue an MPO for a longer period up to a year, at which point the petitioner would be able to ask the court to renew the order. If the order was issued based on false or frivolous charges, the unit commander would refer the petitioner to a law enforcement agency for investigation and possible criminal penalties. Once the respondent is evaluated and determined not to represent a threat to themselves or others, the protection order would be lifted and the firearms in question would be returned to the individual.

The third proposal would define the policies, procedures, and training required to implement the first two proposals. DoD-wide firearm registration and Extreme Risk MPO policies would first be defined in a DoD Instruction (DoDI) issued by the Under Secretary of Defense for Personnel and Readiness and include instructions for unit commanders, health professionals, and law enforcement personnel on how to execute the orders. They would also include provisions for collecting, maintaining, and reporting information on the use of Extreme Risk MPOs across the DoD and their effectiveness,

such as the number of petitions filed and granted, the number of orders that led to a forfeiture of firearms, the number of petitions deemed to be fraudulent, and the reasons for the order.

Detailed guidance, procedures, and training would also be developed and distributed by the DoD and the Air Force to ensure service members and their families understand the specific guidelines on who may file a petition for an MPO and the steps required to do so and to ensure unit commanders, health professionals, and law enforcement personnel understand the law, their authorities, and guidance on how to execute and monitor the MPOs. Provisions must be included in all Air Force guidance, procedures, and training to ensure that neither requesting an MPO to help a fellow airman nor being the subject of an MPO creates a negative stigma that impedes career growth. The former would discourage airmen from requesting MPOs for colleagues experiencing a crisis and the latter would encourage airmen that are suffering a crisis to hide it. Quite the opposite, both requesting and following an MPO should be viewed as a courageous act in service to the Air Force—akin to pulling a pilot from a burning plane—and they should be celebrated as such.

Policy Analysis

Giving Air Force commanders the authority and tools needed to remove an airman's access to firearms during a time of crisis directly addresses the most prevalent means of suicide in the military. While removing firearms from the equation would not prevent all suicidal acts, it would likely 1) reduce the rate of suicide attempts by removing the most popular means of suicide, 2) reduce the rate of suicide by removing the most effective means of suicide, and 3) give commanders, colleagues, family, friends,

health professionals, and first responders additional time to get the suffering airman the help he or she needs to survive their crisis. While the proposal above does not guarantee that firearms will be removed from the equation in every case, it at least gives commanders the ability to remove firearms from an airman's possession when that commander has reason to believe that the airman may be a threat to him or herself or others.

The first proposal, to require the registration of firearms by all service members, will enable the second proposal allowing unit commanders to take away a service member's firearms in a time of personal crisis. While the two proposals together would be more effective than either alone, studies show that requiring the registration of handguns alone lowers suicide rates. One study concluded that states that had a handgun registration law in place in 2010 experienced lower rates of death by suicide compared to states without any such law (11.0 per 100 000 vs 14.6 per 100 000). Even after we accounted for the effects of poverty and population density, states that had such a law in place in 2010 also exhibited a lower rate of suicide by firearms (4.3 per 100 000 vs 8.0 per 100 000) and a lower percentage of deaths due to suicide by firearms (38% vs 53%).⁴⁰

Multiple studies have concluded that the second proposal, the use of Extreme Risk Protection Orders (ERPOs), also reduces death by suicide. Two studies by Swanson and colleagues evaluated the effectiveness of ERPOs in Connecticut and Indiana, the first

⁴⁰ Michael D. Anestis, et. al., "The Association Between State Laws Regulating Handgun Ownership and Statewide Suicide Rates," *American Journal of Public Health* 105, no. 10 (October 2015), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4566551/>.

two states to enact them.^{41,42} Analyzing over ten years' worth of data, these studies concluded that temporarily separating firearms from people considered at high risk of harming themselves or others was effective in preventing firearm-related suicides. Swanson analyzed individual-level data on firearm removal cases and death records in Connecticut and Indiana and concluded that the gun removal laws prevented 72 firearm suicides in Connecticut and 39 firearm suicides in Indiana by counting the number of failed suicide attempts by other means after firearm removal by ERPO. When compared with the number of successful non-firearm suicides after the removal of firearms by ERPO (15 in Connecticut and 7 in Indiana), the number of prevented suicides amount to an 84% success rate in using and ERPO to prevent suicide in both states. While these numbers represent relatively small decreases in the overall suicide rates in these states, approximately 3% in Connecticut and 1.4% in Indiana, they likely underestimate the true decrease in suicide rate because they only count failed suicide attempts by other means after firearm removal and do not include possible averted suicides (with no later attempt) due to lack of immediate access to a firearm. Considering varying levels of risk, Swanson concludes that for every 10 to 20 risk-warrants, one life is saved. Swanson also concludes that ERPOs prevent suicides by intervening in crises, provide a portal and the time needed to connect people in crisis with the mental healthcare system, and save lives by shifting suicide attempt methods from firearms to less lethal means.

⁴¹ Jeffrey W. Swanson, et. al., "Implementation and Effectiveness of Connecticut's Risk-Based Gun Removal Law: Does It Prevent Suicides?" *Law and Contemporary Problems* 80, no. 179 (November 2017), <https://scholarship.law.duke.edu/cgi/viewcontent.cgi?article=4830&context=lcp>.

⁴² Jeffrey W. Swanson, et. al., "Criminal Justice and Suicide Outcomes with Indiana's Risk-Based Gun Seizure Law," *Journal of the American Academy of Psychiatry and the Law* 47, no. 2 (April 2019), <http://jaapl.org/content/jaapl/early/2019/04/15/JAAPL.003835-19.full.pdf>.

The primary limitation of these proposals is that they require knowledge of a service member's ownership or possession of a firearm. If the service member chooses to evade the firearm registration system and conceal a firearm from their family, friends, colleagues, and leaders, then those individuals would not have the knowledge needed to even request an Extreme Risk MPO. If a family member or friend believes the service member owns a firearm and requests an MPO, but the service member conceals it from law enforcement during the search, then even the MPO would be rendered ineffective. The DoD can require disclosure of firearm ownership and impose fines and other penalties if a service member is found to possess an unregistered firearm, but there is no way to ensure full compliance.

The adoption and implementation of DoD-wide firearm registration and Extreme Risk MPO laws would also have negative effects. They would inherently infringe on individual liberty and many service members could perceive such a law as a violation of their Second Amendment right to keep and bear arms. Service members may also view Extreme Risk MPOs as a violation of their Fifth Amendment right to due process because temporary MPOs may be issued without prior notice or a hearing. And while the MPOs would target the individual specifically, they could also affect law-abiding and mentally healthy cohabitants, who would also be prohibited from storing firearms in their residence if they cannot be stored in such a way as to prevent access by the at-risk service member. While courts in several states have determined such laws do not violate the constitution (e.g., *Hope v. Connecticut*, 2016; *Redington v. Indiana*, 2013; and *Davis v. Gilchrist County, Florida Sheriff's Office*, 2019), the U.S. Supreme Court has yet to weigh in.

Independent of the constitutionality of firearm registration and extreme risk laws, a negative perception of them by some service members and potential recruits could itself negatively affect military recruitment and retention. If these laws apply to reserve and National Guard personnel while they are on active status, as proposed above, they could cause more active-duty service members to resign completely at the end of their commissions and enlistments rather than staying in service through the reserves or National Guard components to serve out the twenty years required to obtain military retirement benefits. This would reduce the strength of the reserve and National Guard components and weaken the total strength of the military in times of crisis or extended conflict.

Finally, instituting a registration system and procedures for requesting, issuing, and enforcing MPOs would create added bureaucracy within an already highly-bureaucratic DoD, including new forms to fill out, databases to manage, training to take, and decisions to make. While this bureaucracy would be minimal compared to the benefits, it would create one more set of distractions for service members and commanders.

The economic impact of a military ERPO law would be negligible, but it would not be without financial cost. Implementing the three proposals above would require investment to develop the processes and tools for collecting and tracking firearm ownership information and for requesting, adjudicating, issuing, and enforcing Extreme Risk MPOs. Once in place, the law would also result in a transaction cost for each MPO issued. The request and issuance of the MPO will incur a small administrative cost, the execution of the MPO would incur a law enforcement cost, and the adjudication and

potential appeal of the MPO would incur legal costs on both the side of the Government and the side of the individual. These costs can be recouped through firearm registration fees, resulting in minimal bottom line Air Force budget impact.

Political Analysis

While more than 70% of the public at large support firearm registration and ERPO laws, the political landscape is complicated by the strong lobbying power of the National Rifle Association (NRA) and its influence on elected officials.^{43,44} Even in the aftermath of the Parkland, Florida, school shooting in 2018, when public support for sensible gun control legislation was at a peak, bipartisan proposals for federal legislation that would have encouraged state-level ERPO laws stalled in congress and there was only tepid support from the White House for state-level ERPO laws. As late as February of 2019, Senate Majority Leader Mitch McConnell (R-KY) blocked gun control legislation in the Senate that had previously passed in the House by wide margins.⁴⁵

Today, the landscape is different. Six states and the District of Columbia require registration of some or all firearms.⁴⁶ Seventeen states and the District of Columbia have enacted ERPO laws and five more are actively considering them.⁴⁷ After the August 2019 shootings in San Antonio, Texas, and Dayton Ohio, President Trump has signaled stronger support for gun legislation, including establishing a framework for states to

⁴³ "Guns," *Gallup*, 2020, <https://news.gallup.com/poll/1645/guns.aspx>.

⁴⁴ "APM Survey: Americans' Views on Key Gun Policies," APM Research Lab, August 20, 2019, <https://www.apmresearchlab.org/gun-survey-red-flag>.

⁴⁵ Nicholas Wu, "This is the gun control legislation Mitch McConnell won't allow senators to vote on," *USA Today*, August 5, 2019, <https://www.usatoday.com/story/news/politics/2019/08/04/mass-shootings-what-congress-doing-gun-control/1916451001/>.

⁴⁶ "Registration," Giffords Law Center to Prevent Gun Violence, 2018, <https://lawcenter.giffords.org/gun-laws/policy-areas/gun-owner-responsibilities/registration/>

⁴⁷ Grace Segers, "What are 'red flag' laws, and which states have implemented them?" *CBS News*, August 9, 2019, <https://www.cbsnews.com/news/what-are-red-flag-laws-and-which-states-have-implemented-them/>.

follow in implementing ERPOs.⁴⁸ Speaking from the White House he said “We must make sure that those judged to pose a grave risk to public safety do not have access to firearms and that if they do, those firearms can be taken through rapid due process... That is why I have called for red flag laws, also known as extreme risk protection orders.” Senator McConnell also signaled a willingness to pass gun control legislation, saying “What we can’t do is fail to pass something, you know, by just locking up and failing to pass — that’s unacceptable.” In August 2019, Republican Senator Lindsay Graham (R-SC) and Democratic Senator Richard Blumenthal (D-CT) introduced a bipartisan bill that would supply grants to help states implement ERPO laws. In September 2019, the House Judiciary Committee passed a similar bill that was introduced by Democratic Representative Salud Carbajal (CA-24). These developments signal greater support for the ERPO concept and ERPO laws at the state level and may open a window for ERPO proposals that are fully within federal jurisdiction, including military installations and personnel.

These proposals will be supported by gun control advocacy groups and congressional leaders in both houses of Congress and on both sides of the aisle. The Giffords Law Center to Prevent Gun Violence, the Brady Campaign to Prevent Gun Violence, the Coalition to Stop Gun Violence, and the Everytown for Gun Safety movement all advocate for firearm registration and ERPO laws. In the House of Representatives, Democratic Representatives Salud Carbajal (D-CA-24), Ted Deutch (D-FL-22), Don Beyer (D-VA-08), and Lucy McBath (D-GA-06) introduced ERPO

⁴⁸ Kristen Welker, “Trump in talks with key senators on gun control legislation,” *NBC News*, August 14, 2019, <https://www.nbcnews.com/politics/white-house/trump-talks-key-senators-gun-control-legislation-n1042251>.

legislation in 2019. On the Republican side of the aisle, Representatives Brian Fitzpatrick (R-PA-01) and Christopher Smith (R-NJ-04) cosponsored one of these bills. In the Senate, Democratic Senator Diane Feinstein (R-CA) was joined by 25 other Democrats and 2 Independents in introducing ERPO legislation in February 2019, and Republican Senators Lindsay Graham (R-SC) and Marco Rubio (R-FL) also introduced ERPO legislation in 2019. Additionally, several senators and representatives who had previously voted against gun control legislation have publicly stated that they would support red flag laws, including Senator Rob Portman (R-OH) and Representatives Mike Turner (R-OH-10) and Adam Kinzinger (R-IL-16).

While Senate Minority Leader Chuck Schumer supports ERPO legislation, he sees them as a half-measure if they are not paired with universal background checks. Senator Schumer said Democrats would try to require any red flag measure be paired with legislation on universal background checks, stating “The notion that passing a tepid version of [a red flag] bill—alone—is even close to getting the job done in addressing rampant gun violence in the U.S. is wrong and would be an ineffective cop-out.”⁴⁹

The proposals above will meet their greatest resistance from the NRA, which has a considerable influence on the U.S. members of Congress that will need to vote on it. While the NRA has historically opposed ERPO laws, their stated policy position leaves open the possibility of supporting such a law if it meets certain conditions. The NRA’s primary objections to existing ERPO laws are based on concerns about their perceived infringement on the 2nd amendment right to bear arms and the 5th amendment right to due

⁴⁹ Marianne Levine, “Schumer warns GOP against settling for 'tepid' red flag laws,” *Politico*, August 7, 2019, <https://www.politico.com/story/2019/08/07/chuck-schumer-universal-background-laws-gun-control-1451041>.

process. The NRA website lists nine requirements that an ERPO law must meet to gain NRA support.⁵⁰ The proposals above incorporate seven of those requirements, but do not incorporate two:

- A person's Second Amendment rights should only be temporarily deprived after a hearing before a judge, in which the person has notice of the hearing and can offer evidence on his or her behalf.
- The process should allow firearms to be kept by law-abiding third parties, local law enforcement, or a federally licensed firearms dealer when an individual is ordered to relinquish such firearms as a condition of the ERPO.

The first of these requirements was not incorporated into the proposal above because giving a suicidal person advance notice of a commander's intent to confiscate their firearms would aggravate and accelerate that person's suicidal thoughts. The second was not incorporated because allowing time for the individual to transfer or surrender his or her firearms on their own would also allow them time to use a firearm to commit suicide. While the proposals meet seven of the nine NRA requirements, because they do not meet all the requirements the NRA will likely oppose them and exert pressure on members of Congress to vote against them. The NRA has also consistently opposed state and federal firearm registration laws, so they would likely oppose a similar law applying only to military service members.

Despite the expected opposition of the NRA, few U.S. Senators and Representatives have voiced opposition to the concept of red flag laws in the last two years. At a Senate Judiciary Committee hearing on the topic in March of 2019, even the

⁵⁰ "Emergency Risk Protection Orders (ERPOs)," *National Rifle Association Institute for Legislative Action*, January 8, 2019, <https://www.nraila.org/get-the-facts/emergency-risk-protection-orders-erpos/>.

most ardent pro-gun Senators stuck to simple, pro-Second Amendment talking points without specifically opposing red flag laws, and there was an “unusual sense of unity” among the senators and witnesses that red flag laws should be a legislative priority.⁵¹ There is greater public opposition to state and federal firearm registration laws, and that opposition can be expected to translate over to firearm registration for military service members. For example, in 2019, Senator Joni Ernst (R-IA) joined Senator Cindy Hyde-Smith (R-MS) and nine of their colleagues in reintroducing the Gun-owner Registration Information Protection Act (GRIP Act) to ensure federal funding cannot be used by states, localities, or any other organization to maintain gun registries.

Because the proposals above would be enacted through the NDAA, the Chairmen of the House and Senate Armed Services Committees will be critical stakeholders. Representative Adam Smith (D-WA-9), the Chairman of the House Armed Services Committee, co-sponsored Representative Carbajal’s 2019 ERPO bill and supports other gun-control legislation, including universal background checks, so he can be expected to support the proposals above. However, Senator James Inhofe (R-OK), the Chairman of the Senate Armed Services Committee, has traditionally voted against gun control legislation, including gun registration legislation. In the aftermath of the 2017 Las Vegas mass shooting by a lone white American gunman, Senator Inhofe reiterated a normal Republican talking point that gun laws do not affect gun violence and then inexplicably blamed the existence of “sanctuary cities” for the lawless culture that fosters mass shootings. After the August 2019 shootings in San Antonio and Dayton, Senator Inhofe has been hesitant to speak publicly about ERPO laws specifically and has only indicated

⁵¹ Nora Biette-Timmons, “Senate Republicans Voice Support for Red Flag Laws, With Caveats,” *The Trace*, March 26, 2019, <https://www.thetrace.org/2019/03/red-flag-law-senate-hearing-republicans/>.

on a tepid desire to achieve a bipartisan consensus on any gun control legislation.⁵² It may be possible to convince Senator Inhofe to support the proposals above by pointing out that Oklahoma had the 13th highest suicide rate in 2017, has a higher rate of veteran suicide than the national average, and that 66% of its suicides involved firearms.⁵³

Within the military, civilian and uniformed leaders have named suicide prevention as a top priority and have lamented the lack of a clear solution. To date, DoD suicide prevention efforts have focused on service member resiliency and not on gun control measures. There is no public evidence of opinions one way or the other from DoD or Air Force leaders on ERPO laws. However, in the wake of the Fort Hood shooting in 2014, a study was commissioned that recommended, among other things, that installation commanders be given the authority to expand the mandatory registration of firearms to include privately-owned firearms that are stored off the installation.

If senior leaders within the military publicly advocate for DoD-wide registration and ERPO laws, that advocacy may give members of Congress the top-cover needed with their constituents to overcome NRA resistance and pass the laws. While some gun-owning members of the military may oppose the laws, a public endorsement from senior military leaders that is grounded in a genuine concern for the safety and well-being of service members may change minds. This public endorsement could be made in the form of a speech at a public event, a press release, or in testimony before the House or Senate Armed Services Committee.

⁵² Tara Golshan, “Republican senator blames the culture of “sanctuary cities” for mass shootings,” *Vox*, October 3, 2017, <https://www.vox.com/policy-and-politics/2017/10/3/16412100/republican-sanctuary-cities-las-vegas-shooting-inhofe>.

⁵³ State of Oklahoma, *Suicide Facts*, (Oklahoma City, 2019), https://www.ok.gov/health2/documents/IPS-FS_Suicide_Region1_GroupNE1_2019.pdf.

In addition to a public endorsement, another political tactic that DoD and Air Force leaders could use to push firearm registration and Extreme Risk MPO legislation is to tie it to other politically-important issues through the NDAA process. Many of the most important political players needed to pass gun control legislation also have large military installations and programs in their states and districts, including Senate Majority Leader Mitch McConnell, Senate Judiciary Committee Chairman Lindsey Graham, and Senate Armed Services Committee Chairman James Inhofe. If the DoD and Air Force endorse DoD-wide firearm registration and Extreme Risk MPO laws, they could use their advocacy for installations and programs in these Senators' home states as leverage to secure their votes on DoD gun control legislation.

Recommendation

Suicide is a clear and present danger to the lives of American service members and the readiness of U.S. armed forces. It is the 2nd leading cause of death among active-duty military personnel behind only the broad category of “accidents” and it causes 40% more military deaths than combat. Over the past 20 years, the Air Force has led the other military services in combating suicide within its ranks through leadership, coordination, communication, camaraderie, education, training, mental health treatment, community engagement, and suicide data analysis and reporting. However, despite its best efforts, the suicide rate in the Air Force continues to climb. In 2019, 137 Air Force personnel committed suicide, representing a 33% increase over 2018 and a surge to the highest total in three decades.

It is time for direct action against the most lethal suicide threat—firearms. 70% of military suicides are committed using firearms. With a 90% fatality rate, easy access to a

firearm during a suicidal crisis can have tragic consequences. While the Air Force trains its members well to identify and help airmen in distress, Air Force leaders cannot remove the deadliest means of suicide from the possession of airmen at extreme risk. Therefore, I recommend that you ask Congress to pass laws requiring all service members to register their privately-owned firearms with their unit commanders and allowing the request, issuance, execution, and monitoring of Extreme Risk MPOs when a service member is determined to be an extreme risk to themselves or others. I recommend that you make the case for these laws in testimony before the House and Senate Armed Services Committees and that you commit Air Force legislative liaison resources to help draft proposed language for inclusion in the next NDAA.

Once enacted, I recommend that you develop policies, procedures, and training to enforce these laws and to ensure that neither requesting nor following an Extreme Risk MPO creates a negative stigma that impedes career growth. You and other Air Force leaders should foster a culture that not only encourages but celebrates the use of suicide prevention tools, including Extreme Risk MPOs. Ideally, just as both the rescuer and the pilot are viewed as heroes when a pilot is pulled from a burning plane, both the petitioner and the respondent of an Extreme Risk MPO should be viewed as heroes in the Air Force's "Wingman" culture.

While addressing suicide by firearm alone will not put an end to the scourge of suicide in the military, it does attack the largest and most lethal segment of the problem. Because 70% of military suicides are committed by a firearm, 80% of people considering suicide give some warning sign beforehand, and ERPOs are 84% effective in preventing suicide when family members, friends, or colleagues know that a person in crisis has

access to a firearm and acts on those warning signs, combining firearm registration and Extreme Risk MPOs with existing Air Force suicide prevention and training programs could reduce the suicide rate in the Air Force by up to 50%. These proposals capitalize on the Air Force's investments and progress to date, exploit and enhance the Air Force's "Wingman" culture, and offer an opportunity for bold action based on proven policies to save lives and improve the resilience and readiness of the Air Force.

Curriculum Vitae

Jeff Johnson is a Senior Associate at Booz Allen Hamilton, a global strategy and technology consulting company. He leads a \$30 million per year space and missile system integration business and is active in the firm's engineering and people development initiatives. He leads a team of over 100 consultants advising senior Air Force and Space Force officers and executives in the development, production, and management of military spacecraft, mission systems, and user equipment. Jeff's expertise is in systems engineering, analysis, integration, and program management. He has led several systems engineering and integration engagements to help deliver communication, navigation, global strike, and missile defense capabilities to the military.

Outside of work, Jeff applies his system analysis and program management expertise to help solve homelessness and mental health issues in his community. He serves on the City of Long Beach Homeless Services Advisory Committee and as a member of the Long Beach Continuum of Care Board. In these roles, he helped define the City of Long Beach's strategic plan for addressing homelessness and administered over \$30M in federal grants, which helped lead to a 20% reduction in homelessness to the lowest level in two decades.

Jeff was born on July 17th, 1981 in Los Angeles, CA, raised in Chico, CA, and now lives in Long Beach, CA. He received a Bachelor of Science in Electrical Engineering from the University of California, San Diego in 2003, a Master of Science in Electrical Engineering from the University of California, Irvine in 2006, and a Master of Arts in Public Management from Johns Hopkins University in 2020.